DMR Copy of Record

Permit						1_						1_			_			
				Permittee:		ReEnergy Holdings				Facility:			REENERGY ROXBURY, INC.					
Major: No				Permittee Address		101 Gerard Street Roxbury, MA 02119				Facility Location:			101 GERARD STREET ROXBURY, MA 02119					
Permitted Feature: 001 External Outfall				Discharge:			001-IW Impaired Water											
Report I	Dates & Status																	
						DMR Due Date:	08/31/	08/31/22				Status:			NetDMR Validated			
Conside	erations for Form Compl	•																
Principal Executive Officer																		
First Name:						Title:		Telephone:										
Last Name:																		
No Data	Indicator (NODI)																	
Form NO																		
	Parameter		Monitoring Location	Season #	Param. NOD		Quant	ity or Loading				Q	uality or C	oncentra	tion		# of Ex. Frequency of Ana	lysis Sample Type
Code	Name						Value 1	Qualifier 2 Value 2	2 Units	Qualifier 1	Value 1	Qualifier 2	Value 2	Qualifier 3	Value 3	Units		
20540	B	'DOD 1	4 500			Sample Permit Req.									Reg Mon MAXIMU	M 19 - ma/l	L 01/YR - Annual	GR - GRAB
39516	Polychlorinated biphenyls	s [PCBs]	1 - Effluent Gross	0		Value NODI									C - No Discharg			
Submis	sion Note																	
Submission Note If a parameter row does not contain any values for the Sample nor Effluent Trading, then none of the following fields will be submitted for that row: Units, Number of Excursions, Frequency of Analysis, and Sample Type.																		
Edit Check Errors																		
No errors.																		
Comme																		
Comme	nto																	
Attachn	nents																	
Attachments No attachments.																		
Report I	Last Saved By																	
ReEnergy Holdings																		
User:	_																	
Name:																		
Name: Frederic Bruneau E-Mail: fbruneau@reenergyholdings.						com												
Date/Tim	ne:	ne: -04:00)																
	Last Signed By																	
User: FBRUNEAU																		
Name: Frederic Bruneau																		
E-Mail: fbruneau@reenergyholdings.						com												
Date/Tim	ne:				5 (Time Zo													
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